

Have You an Idea?

Do you feel your ideas are too old? Perhaps. But those you have tested through the years may be new outside of your health community—and may be just what someone else needs. Share your ideas. Write us, and we will try to help.

—THE EDITORS

Operation Knoxville

TENNESSEE. Operation Knoxville is the first campaign of its kind to unite the entire resources of a community in seeking out, rehabilitating, and placing in employment the handicapped citizens of a locality.

Knox County, Tenn., where the rehabilitation campaign was launched last February, has some 1,500 known handicapped persons. If at least one-half of this group could be rehabilitated for employment, an estimated 250 families and 700 children would be removed from the public assistance rolls, thereby reducing municipal expenses far beyond the cost of rehabilitation.

Operation Knoxville was initially proposed by the Tennessee State director of vocational rehabilitation. who called an informal meeting of community leaders to discuss plans for rehabilitating the local handicapped population. Local residents and Federal consultants worked out a team approach for the screening and evaluation of rehabilitation cases. Committees were formed of industrial leaders, personnel directors, and representatives from labor unions, medical societies, vocational schools, and other educational facilities.

The Knoxville project has been successful—so much so that in Washington the Office of Defense

Mobilization has worked with the Office of Vocational Rehabilitation of the Federal Security Agency to develop and distribute informational materials about the project for use in radio addresses and public forums throughout the country. These materials have been sent to all State rehabilitation agencies.

Fountain Phi Betes

COLORADO. Courses designed especially for soda-fountain personnel are a special service open to all Colorado communities by the foodservice and sanitation program of the State board for vocational education.

Two short courses are offered, each consisting of four 2-hour sessions. One is open only to experienced, employed personnel, and the other is for high school students working part-time at fountains.

Soda fountain dispensers are no longer called soda fountain "jerks"—this change-over to a self-respecting job designation is one of the early principles taught to the students of the courses.

Specific instruction covers: work routines, dispensing techniques, fountain formulas, tips on sandwich making, proper handling of eating utensils, methods of cleaning and using all fountain equipment, and when and how to use single service utensils.

Part-Time Teachers

ARIZONA. A plan for utilizing services of teachers on a part-time basis in expanding community health services is being put into action here. Elementary teachers with specialized training in health and physical education will disseminate, in their own localities, the latest information on public health to schools and various professional and service groups interested in better health programs. The plan was developed by the State Health Department in cooperation with Arizona State College at Tempe.

Laboratory Aid

BETHESDA, MD. Are you breaking or etching glass pipettes against the rims of glass jars in which they are placed in a disinfecting solution?

Try using a one-fourth-inch bore rubber tubing, which is standard equipment in any laboratory. Split it lengthwise, and cut it to fit around the jar rim. This effective protection against breakage and contamination was devised by a young medical biology technician, Walter S. Hunter, at the National Institutes of Health of the Public Health Service.

Needle Tubes

BROOKLYN, N. Y. Any laboratory can make its own sterilizing tubes for needles, thereby avoiding dulled needles and saving money, according to the Public Health Service Hospital at Manhattan Beach.

Take an ordinary test tube—this is an ideal way to use old, scratched, and etched tubes. Heat it sufficiently to indent a portion where a needle can be suspended. Judge the size of the test tube needle—for a 1½-inch needle, a 120 x 13 mm. test tube is suggested.

Previously, the hospital laboratory used as a holder a test tube plugged with cotton in which the needle rested. But cotton fibers could be drawn into the blood stream by lodging within the hollow of the needle. To avoid this possibility, the problem of suspending the needle in a tube was presented to Ernest Battle, a medical technician in the laboratory. The result is not a new idea—there is a commercial tube available for approximately 25 cents.

The laboratory not only prepares its own supply of needle holders, keeping about 100 sterilized needles on hand at a time—it also maintains a stock of the tubes in the central supply room of the hospital.